

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishment Name					Telephone Number		Date of Inspection (mm/dd/yr) PERMIT #		
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Owner					Purpose:	Follow-u	p Releas	se Date	
					. Routine	~~	10	days	
Owner's A	ddress				2. Follow-up	<u> </u>	-		
					_	Summary of Violations: C			
Person in C	Charge		· · · · · · · · · · · · · · · · · · ·		3. Complaint				
	4	. <			4. Pre-Operational	c_ <i>(</i> 2	ζ NC	<u>C</u> R <u>(X</u>	
Responsible Person's E-mail					5. Temporary	Mony Tu	pe (See back		
responsibi	e i erson s	<u> </u>			6. HACCP	Micha I y	ре (вее васк	oj pagej	
C. de la	I M				7. Other (list)	١	_/	_45_	
Certified F	ood Manag	ger/ -	6/24)			12	3 X _	_45	
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